

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed
ORIGINAL 3/25/08

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33539
 Name: Cherokee Wells, LLC
 Address: P.O. Box 296
 City/State/Zip: Fredonia, KS 66736
 Purchaser: Southeastern Kansas Pipeline
 Operator Contact Person: Emily Lybarger
 Phone: (620) 378-3650
 Contractor: Name: Well Refined Drilling
 License: 33072
 Wellsite Geologist: N/A
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)
 If Workover/Re-entry: Old Well Info as follows:
 Operator: _____
 Well Name: _____
 Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

<u>3/13/08</u>	<u>3/19/08</u>	
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 205-27411-0000
 County: Wilson
 C N2 NW SE Sec. 26 Twp. 29 S. R. 13 East West
2310 feet from (S) N (circle one) Line of Section
1980 feet from (E) W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE (SE) NW SW
 Lease Name: Tindle Well #: A-2
 Field Name: Cherokee Basin Coal Gas Area
 Producing Formation: N/A
 Elevation: Ground: 966' Kelly Bushing: N/A
 Total Depth: 1550' Plug Back Total Depth: N/A
 Amount of Surface Pipe Set and Cemented at 43' 6" Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from surface
 feet depth to bottom casing w/ 165 sx cmt.

Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content _____ ppm Fluid volume _____ bbls
 Dewatering method used _____
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Shannon Skille
 Title: Administrative Assistant Date: 3/25/08
 Subscribed and sworn to before me this 25 day of March
20 08
 Notary Public: Emily S Lybarger
 Date Commission Expires: 2/21/2012

KCC Office Use ONLY

Letter of Confidentiality Received _____
 Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution _____

RECEIVED
 KANSAS CORPORATION COMMISSION
 MAR 27 2008
 CONSERVATION DIVISION
 WICHITA, KS

NOTARY PUBLIC
 EMILY S. LYBARGER
 My Appt. Exp. 2/21/2012
 STATE OF KANSAS